PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2004

Application or Docket Number

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE OF			OTHER THAN R SMALL ENTITY	
TOTAL CI	AIMS							RATE	FEE	7	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	395.00	OR	BASIC FEE	790.00
TOTAL CHARGEABLE, CLAIMS			minus 20=					×25	·	OR	x-50.	
INDEPENDENT CLAIMS			ininus 3 =					x 100		OR	×200	,
MULTIPLE	DEPENDENT	RESENT			<u> </u>		+180		OR	+360		
* If the diff	erence in colu	ess than zero, enter "0" in column			xotumn 2	į	TOTAL	·	OR	TOTAL		
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3						<u>.</u> .	SMALL	ЕИПТҮ	OR	OTHER SKALL!		
Total Page 1	DO REM	AIMS AINING TER IDMENT		PREVIO	BER SUSLY	PRESENT		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAI FEE
Total		1	Minus	1.04		=		x 25		OR	XX	
Independent * 3 Independent * 3 Independent Independen			Minus JLTIPLE DE	PENDENT	CLAIM	-		×100		OR	x200	
	~ <u>} </u>			,				+180		OR	+360	1
							,	TOTAL ADDIT, FEE		OR	TOTAL ADDIT. FEE	
	(Colu	ımn 1)		(Colun	nn 2)	(Column 3)	_					
SNT B	REM	AIMS AINING TER		HIGHI NUME PREVIO PAID	BER	PRESENT EXTRA		RATE,	ADDI- TIONAL FEE		RATE	ADDI- TIONA FEE
Total			Minus	ş-a) =		x 25		OR	x50	
2 Indep	endon!		Minus	PENDENT	C) A16.6	(7)		x 100		OR	x200	e-transferential descriptions and re-
FIRST	RESENTATIO	IN OF MIO	ETPEE DE	ENDENT	COART		1	+180		OR	+360	
								TOTAL UDDIT, FEE		OR	TOTAL ADDIT. FEE	
						6.54.5						-
ENTC	REMA AF	UMS UNING TER DMENT		HIGHI HUME PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	TIONA FEE
Total Independent	. *		Minus :	**		=		×25	·	OR	×50	
Indeper	pendent & Minus ***			=		× 100		OR	×200			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+ 180		OR	+360	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. * If the "Highest Number Previously Paid Fox" IN THIS SPACE is less than 20, enter "20."								101AL DOIT. FEE		OR	TOTAL ADDIT, FEE	
seed the Filip	hest Number Press Number Prev	work Pal	IN FAC IN TH	IS SPACE IS	less that	n 3 enter			propriate box			•

FORM PTO-FTE PROMISIONS

PAINS AND TIME-THAT CHEEK U.S. DEPARTMENT OF COMMERCE